

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>ph</i>	<i>CPB/14</i>	<i>11/14/03</i>
O.I.P.E. CLASSIFIER	<b>BEST AVAILABLE COPY</b>		
FORMALITY REVIEW		<i>1-5-01</i>	
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Original	Date
1	✓	11/14/03
2	✓	5/21/04
3	✓	
4	✓	
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If more than 150 claims or 10 actions  
staple additional sheet here

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